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RCE

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PTO/SB/30 (10-01)

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**REQUEST
FOR
CONTINUED EXAMINATION (RCE)
TRANSMITTAL**

Address to:
Mail Stop RCE
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P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	09/773,365
Filing Date	January 31, 2001
First Named Inventor	Khowala et al.
Art Unit	1651
Examiner Name	Irene Marx
Attorney Docket Number	8920-000005/US

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. Submission required under 37 C.F.R. 1.114

a. ☐ Previously submitted

- i. ☐ Consider the amendment(s)/reply under 37 C.F.R. 1.116 previously filed on _____
(Any unentered amendment(s) referred to above will be entered)
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
- iii. ☐ Other _____

b. Enclosed

- i. ☒ Amendment/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☐ Information Disclosure Statement (IDS)
- iv. ☒ Other Photocopy of Merivouri, et al reference (7 pages)
Fee Transmittal Form (1 page)
Return Receipt Postcard

2. Miscellaneous

- a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months. Fee under 37 C.F.R. 1.17(i) required)
- b. ☐ Other _____

3. Fee The RCE fee under 37 C.F.R. 1.17(e) is required by 37 C.F.R. 1.114 when the RCE is filed.

- a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 08-0750
- i. ☒ RCE fee required under 37 C.F.R. 1.17(e)
- ii. ☐ Extension of time fee (37 C.F.R. 1.136 and 1.17)
- iii. ☐ Other _____
- b. ☒ Check in the amount of \$ 750.00 enclosed
- c. ☐ Payment by credit card (Form PTO-2038 enclosed)

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print /Type)	Saul L. Jackson, Ph.D.	Registration No. (Attorney/Agent)	52,391
Signature	<i>Saul L. Jackson</i>	Date	August 29, 2003

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail Label No.: EV 327051698 US in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, Office, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: August 29, 2003

Name (Print /Type)	Saul L. Jackson, Reg. No.: 52,391	Date	August 29, 2003
Signature	<i>Saul L. Jackson</i>		

Burden Hour Statement This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark

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